

Staff Complaints and Appeals Policy and Procedures



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1. PURPOSE

The Staff Complaints and Appeals Policy and Procedures outline Barton Business School's ("BBS") internal processes for resolving staff complaints and appeals.

To maintain BBS's commitment to confidentiality, equity, and accountability, this policy and these procedures provide guidelines for addressing any staff complaints and subsequent appeals.

This policy and these procedures comply with the <u>Higher Education Standards Framework</u> (<u>Threshold Standards</u>) <u>2021</u>, especially Standard 6.2.

2. SCOPE

This policy and these procedures apply to all BBS's academic and non-academic staff.

This policy and these procedures also apply to BBS's internal governing bodies and committees.

3. DEFINITIONS

Refer to BBS's Glossary of Terms.

4. POLICY

- a. BBS is committed to nurturing a safe, supportive, and welcoming environment for all staff and members of boards and committees.
- b. BBS must ensure an effective, fair, and transparent approach is taken to promptly manage staff complaints and appeals.

4.1. PRINCIPLES

BBS must abide by the following principles:

- a. Complaints and appeals must be resolved objectively, promptly, consistently, sensitively, and confidentiality.
- b. All personal information collected under this policy and these procedures must be held and used in accordance with BBS's *Privacy Policy*.
- c. All parties' rights in a complaint or appeal process must be protected. The complainant, respondent, and any witnesses must not be victimised nor treated adversely.
- d. Complaints and appeals must be viewed as opportunities to improve operations.
- e. All parties involved in a complaint or appeal must:
 - i. Approach the matter with the intent to resolve issues practically and cooperatively.



- ii. Treat each other respectfully.
- iii. Not engage in threatening or intimidating behaviour.
- f. Any party to a complaint or appeal process may be assisted or accompanied by a support person.
- g. BBS must ensure that staff have access to the *Staff Complaints and Appeals Policy and Procedures*.
- h. Staff must not be charged any fee in relation to an internal complaint or appeal processes.

4.2. TYPES OF COMPLAINTS

- a. Academic Complaint:
 - i. Academic staff must maintain the highest integrity in accordance with the *Staff Code* of *Conduct*.
 - ii. Any allegation of academic misconduct must be addressed according to the *Staff Code of Conduct*.
- b. Non-academic Complaint:

Examples of non-academic complaints that will be addressed under this policy and these procedures include:

- Work arrangements and conditions relating to staff professional development, training, staff entitlements, supervision, working hours, performance reviews, wage or salary levels, and access to or condition of facilities or resources.
- ii. Psychosocial safety conditions in the workplace such as bullying, discrimination, or sexual harassment that affect the psychological and social well-being of employees.
- iii. Workplace safety, such as issues with occupational health and safety.
- iv. Information accuracy, currency, privacy, or confidentiality issues.

5. PROCEDURES

- a. BBS must maintain a *Staff Complaints Register* containing details of all complaints and appeals.
- b. BBS must maintain strict confidentiality to minimise rumours, escalation of a situation, discrimination, or victimisation.
- c. The complaint resolution procedures must follow a three-step process:

5.1. STEP 1 – INFORMAL PROCESS

a. Raising an informal complaint with the relevant line manager is the first step to understanding and attempting to resolve a complaint. The complainant and the respondent might seek to engage in face-to-face discussions to try to resolve the complainant's concern.



- b. Staff not involved in the complaint may support and facilitate an informal resolution if the complainant and/or respondent requests their involvement. Nevertheless, all parties involved must provide their consent to that staff's involvement.
- c. At this early stage, complaints should be addressed and resolved in good faith, informally, confidentially and within a reasonable time frame. If the complainant is not satisfied with the outcome, however, they may decide to lodge a formal complaint or to exercise their rights under relevant federal or state laws.
- d. If the complainant is concerned about the respondent's potential adverse reaction to discussing the complaint informally, they may choose to bypass this step and lodge a formal complaint rather than approach the respondent directly.
- e. If the complaint is about a serious case of sexual harassment, the complainant must bypass this step and proceed directly to the next step.

When a senior staff member becomes aware of an informal complaint, they should provide details to the Administration & HR Manager.

5.2. STEP 2 – FORMAL PROCESS

- a. If the complainant is not satisfied with the outcome of an informal resolution process, a formal complaint must be made by completing and lodging a Staff Complaint Form with the Administration & HR Manager. Please refer to the *Discrimination, Bullying, Harassment and Sexual Misconduct Policy and TEQSA Good Practice Note: Preventing and responding to sexual assault and sexual harassment in the Australian higher education sector.*
- b. If the Administration & HR Manager is the subject of the complaint, the complaint should be lodged with the Chief Executive Officer (CEO).
- c. If the CEO is the subject of the complaint, the complaint should be lodged with the Chair of the Board of Directors (BoD).
- d. The Staff Complaint Form must be available to all staff.
- e. The completed Staff Complaint Form must include relevant facts and supporting documents and specify the resolution the complainant is seeking.
- f. Upon receiving the complaint, the Administration & HR Manager will:
 - i. check that all evidence and supporting documents are included in the submission;
 - ii. acknowledge the formal complaint by email within five (5) working days of its receipt;
 - iii. record the details of the complaint in the Complaints Register.
- g. The Administration & HR Manager must commence investigation of the complaint within five (5) working days of notifying the complainant.
- h. The Administration & HR Manager must take all reasonable measures to resolve the complaint.
- i. The respondent must be notified of the nature of the complaint made.
- j. The respondent must be asked to provide a written response to the complaint within five (5) working days.



- k. The Administration & HR Manager must provide feedback to the complainant about the respondent's response. This may involve face-to-face meetings with the complainant and respondent.
- I. Other parties or witnesses may be asked to provide written comments about a complaint.
- m. The complainant and the respondent must be allowed to bring a support person to accompany them to any meetings.
- n. A record of the meeting and the agreed actions must be created by the Administration & HR Manager and shared with the complainant and respondent to check for completeness and accuracy.
- o. A written notification to the complainant and the respondent must be provided by the Administration & HR Manager within twenty (20) working days of the outcome of the formal complaint process. This notification must include the reasons for the outcome and any steps taken to be taken resolve the complaint.
- p. If for some reason the investigation takes longer, the Administration & HR Manager must advise the complainant and the respondent in writing.
- q. If the formal complaints process results in a decision favouring the complainant, the Administration & HR Manager must promptly implement any decision or required corrective actions.
- r. The complainant and respondent must be notified in writing of the actions taken.
- s. The Administration & HR Manager must advise the complainant and respondents about their right to appeal if they feel the grievance remains unresolved after the formal complaints process or they contend the outcome of the formal complaints process is flawed.

5.3. STEP 3 – APPEAL AND REVIEW

- a. If the complainant or the respondent believes the results of the formal complaints process to be flawed and are not satisfied with the outcome, they may appeal for a review within twenty (20) working days of receiving the written outcome of the formal complaint process.
- b. An appeal must be made by completing the Staff Complaint Form and submitting it to the Administration and HR Manager. The form must include relevant facts, additional information, and all supporting documents.
- c. The Administration & HR Manager must check that all evidence, additional information, and supporting documents are included with the form, notify the complainant and respondent that the appeal has been received, and refer the case to the Chief Executive Officer (CEO) for investigation within five (5) working days of receiving it.
- d. The appeal must lay out the grounds for the appeal. Supporting evidence must be supplied in addition to any new information not previously given in support of or in response to the complaint.
- e. The CEO must have access to all relevant information to investigate the appeal. The complainant and the respondent must be allowed to present verbal or written evidence.



- They must also be allowed to bring a support person to accompany them during this process.
- f. Within twenty (20) working days, the CEO must provide written notification to the complainant and respondent of the outcome of the internal appeal, including the reasons for the outcome.
- g. The CEO must advise the complainant and respondent in writing if for some reason the investigation of the appeal is taking longer than twenty (20) working days.
- h. If the internal appeal procedure results in a decision in favour of the complainant, the CEO must promptly implement any decision or required corrective actions.
- i. The complainant and respondent must be notified in writing of the actions taken.
- j. The CEO must also advise the complainant and respondent in writing about their right to appeal externally if they feel the grievance remains unresolved after the appeal process or they contend the outcome of the appeal process is flawed.
- k. The process and outcome of the appeal and proposed resolution must be entered into the *Complaints Register*.

6. EXTERNAL APPEAL

- a. After the internal appeal and review process, the parties must be informed of their legal rights under federal and state law and that, to this end, they should secure independent legal advice.
- b. If an external process occurs, the process and the outcome must be recorded in the *Complaints Register*.



7. VERSION CONTROL

Document title	Staff Complaints and Appeals Policy and Procedures		
Approved By	Board of Directors (BoD)		
Date of Review	This document is to be reviewed every two years at a minimum from the date of final approval.		
Related Documents	 Student Academic Integrity Policy and Procedures Conflict of Interest Policy Delegations Policy Discrimination, Bullying, Harassment, and Sexual Misconduct Policy Diversity, Equity, and Inclusion Policy Feedback Policy and Procedures Fraud and Corruption Control Policy and Procedures Privacy Policy Scholarly Activity and Professional Development Policy Records Management Policy Staff Code of Conduct Staff Recruitment and Selection Policy Health and Safety Policy and Procedures 		
Related Legislation and References	 Higher Education Standards Framework (Threshold Standards) 2021 Tertiary Education Quality and Standards Agency (TEQSA) Act 2011 TEQSA Good Practice Note: Preventing and responding to sexual assault and sexual harassment in the Australian higher education sector Education Services for Overseas Students Act 2000 (ESOS Act) National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code) Higher Education Support Act 2003 Higher Education Provider Guidelines 2023 		
Version	Notes	Date Approved	
1.0	 The first draft tabled in the LTC meeting Minor changes were made by the LTC in section 4 		
1.1	Document recommended by AB to BoD with minor update in Section 4.1.a		
2.0	Document approved subject to changes on section 4.2.b to include 'psychosocial safety', section 5.2.b and minor editorial changes	14/03/2023	
2.1	Update in the related legislation and references section	21/04/2025	